

097 657823

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N
 = Allowed I
 — (Through numeral) Canceled A
 : Restricted O

Rejected
 Allowed
 Canceled
 Restricted

N
 I
 A
 O

Rejected
 Interference
 Appeal
 Objected

Claim	Date	Claim	Date	Claim	Date
Final Original		Final Original		Final Original	
1		51		101	
2		52		102	
3		53		103	
4		54		104	
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46		96		146	
47		97		147	
48		98		148	
49		99		149	
50		100		150	

If more than 150 claims, attach separate
 staple and continue on next page

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